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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)					_	<del>_</del>	
	Coker, Adam, Ward, ,					1		
	(b) Address (number and street)   504 Audobon Dr			s changed		Candidate's FEC Identification Number     H6NC02130		
	(c) City, State, and ZIP Code					3. Is This No		
	Boone		NC	2860	7	Statement (N	) OR (A)	
4.	Party Affiliation	5. Office Sought			1	rict of Candidate		
	DEMOCRATIC PARTY	House			NC	13		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
(a) Name of Committee (in full)  ADAM COKER FOR CONGRESS								
	(b) Address (number and street) 504 AUDOBON DR							
	(c) City, State, and ZIP Code							
	GREENSBORO				NC	27410		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)								
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.								
NOTE: This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full)								
(b) Address (number and street)								
(c) City, State, and ZIP Code								
	I certify that I have exa	mined this Staten	nent and to	the best of	my knowledge a	nd belief it is true, correct	and complete.	
Signature of Candidate Date								
Co	oker, Adam, Ward, ,	[Electronically Filed]				06/14/2017		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								

FEC FORM 2 (REV. 02/2009)